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**\*BIBDATASHEET\***

CONFIRMATION NO. 8349

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/843,132	<b>FILING OR 371(c) DATE</b> 04/25/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 6794F- 000032/US/CPA
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/470,951 12/22/1999 ABN  
 which claims benefit of 60/113,786 12/23/1998

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 06/26/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MO	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 181	<b>INDEPENDENT CLAIMS</b> 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

47376

**TITLE**

Antiangiogenic combination therapy for the treatment of cancer

<b>FILING FEE RECEIVED</b> 3978	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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